

United States

## **Environmental Protection Agency**

Washington, DC 20460

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|---------|-------|----|------|---|---------|--|--|---|
| <br>140 | ) CFR | 15 | 2.85 | , |         |  |  |   |
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|   | 140 CFR 132.03                                    | /  |
|---|---|--|
| Applicant's Name and Address                        |   | EPA File Symbol/Registration Number  |
| Univar USA, Inc.<br>11149 Research Blvd., Suite 260 |   | 73748-XXX  |
| Austin, TX 78759                                    |   | Product Name   |
| -   |   | I MaxxPro 2F   |
|   |   | Date of Confidential Statement of Formula (EPA Form 8570-4)  |
|   |   | September 30, 2007   |
| As an authorized representative of the              | applicant for registration of th                  | e product identified above, I certify that:  |
| (1) This product contains the follow                | ing active ingredient(s):                         |  |
| Imidacloprid  |   |  |
|   |   |  |
|   |   |  |
|   |   |  |
|   |   | ent solely as the result of the use of that active   |
| which is registered under FIFRA                     | Section 3, is purchased by us                     | other product which contains that active ingredient from another producer, and is labeled for at least   |
| each use for which my product i                     |   | and to label |
| (O) Indiana by absolute (A) or (D) to               |   |  |
| (3) Indicate by checking (A) or (B) b               | elow which paragraph applies:                     | •  |
| (A) An accurate Confidential Star                   | tement of Formula (EPA FORM                       | 1 8570-4) for the above identified product is  |
| attached to this statement. That                    | by company name, registration number, and product |  |
| name, the source of the active in                   |   | (1).   |
| (B) The Confidential Statement of                   | OR  F Formula (CSE) (EPA Form RE                  | 570-4) referenced above and on file with the EPA is  |
| complete, current, and accurate                     |   |  |
|   |   |  |
| (4) The following active ingredients                | in this product qualify for the                   | formulator's exemption.  |
|   | Source  |  |
| Active Ingredient                                   | Product Name                                      | Registration Number  |
| Imidacloprid Technical                              |   |  |
|   |   |  |
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| oignature   | Name and Title                                    | Date   |
| X on mix  | Jane M. Miller. Agent                             | 9/30/200   |

EPA Form 8570-27 (Rev. 8-95)

White - EPA copy Yellow - Applicant copy